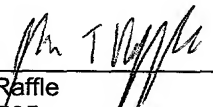



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IC951
U.S. PTO

Utility Patent Application Transmittal	Attorney Docket No.: CB-11		
	First Inventor: Robert H. Dahla		
	Title: Electrosurgical Apparatus and Methods for Treatment and Removal of Tissue		
	Express Mail Label No.: EK025306865US		
APPLICATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) 2. <input type="checkbox"/> Applicant claims small entity status. 3. <input checked="" type="checkbox"/> Specification - Total Pages <u>65</u> - Descriptive title of the invention - Cross Reference to Related Applications - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claims - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawings - Total Sheet <u>28</u> 5. <input checked="" type="checkbox"/> Oath or Declaration - Total Pages <u>1</u> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) i. <input type="checkbox"/> Deletion of Inventors 6. <input type="checkbox"/> Application Data Sheet	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Form b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies <table border="1" data-bbox="738 756 1429 1186"> <tr> <th data-bbox="738 756 1429 787">ACCOMPANYING APPLICATION PARTS</th> </tr> <tr> <td data-bbox="738 787 1429 1186"> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet/documents) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document 12. <input type="checkbox"/> Information Disclosure Statement (PTO-1449) 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard 15. <input type="checkbox"/> Certified Copy of Priority Document 16. <input type="checkbox"/> Request and Certification under 35 USC 122(b)(2)(B)(I) 17. <input type="checkbox"/> Other _____ </td> </tr> </table>	ACCOMPANYING APPLICATION PARTS	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet/documents) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document 12. <input type="checkbox"/> Information Disclosure Statement (PTO-1449) 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard 15. <input type="checkbox"/> Certified Copy of Priority Document 16. <input type="checkbox"/> Request and Certification under 35 USC 122(b)(2)(B)(I) 17. <input type="checkbox"/> Other _____
ACCOMPANYING APPLICATION PARTS			
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18. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: <u>09/586,295 filed June 2, 2000</u> Prior application information: Examiner: _____ Group Art Unit: _____ For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5B is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. Correspondence Address: <p style="text-align: center;">Customer Number 021394</p>			
<div style="display: flex; justify-content: space-between;"> <div data-bbox="129 1585 568 1732">  John T. Raffle Reg. 38,585 </div> <div data-bbox="730 1585 1104 1732"> Date <u>2/4/02</u> </div> </div>			
CERTIFICATE OF MAILING			
I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated below, Express Mail Label No. <u>EK025306865</u> and is addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231 <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div data-bbox="129 1848 568 1953">  Katie Zarzana </div> <div data-bbox="730 1848 1218 1953"> Date <u>February 5, 2002</u> </div> </div>			

 IC951 U.S. PTO
 10/072599
 02/05/02

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C951 U.S. PTO

**FEE TRANSMITTAL
for FY 2002**

Application No.: *unassigned*
Filing Date: February 5, 2002
First Named Inventor: Robert H. Dahla et al.
Examiner Name: *unassigned*
Group Art Unit: *unassigned*

[] Applicant claims small entity status. 37 CFR 1.27

Attorney Docket No.: CB-11

TOTAL AMOUNT OF PAYMENT \$2,024

FEE CALCULATION (continued)

METHOD OF PAYMENT

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account No. 50-0359
ArthroCare Corporation

FEE CALCULATION

BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) \$740

2. EXTRA CLAIM FEES

Total Claims		Extra Claims		Fee from below		Fee Paid
82	- 20** =	62	x 18	=	1116	
Independent Claims	5	- 3** =	2	x 84	=	168
Multiple Dependent						

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dep. Claim
109	84	209	42	**Reissue indp. over orig.
110	18	210	9	**Reissue clms over 20

SUBTOTAL (2) \$1,284

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	Request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner Action	
113	1,840	113	1,840*	Requesting publication of SIR after, Examiner Action	
115	110	215	55	Extension for reply within 1 st month	
116	400	216	200	Extension for reply within 2 nd month	
117	920	217	460	Extension for reply within 3 rd month	
118	1,440	218	720	Extension for reply within 4 th month	
128	1,960	228	980	Extension for reply within 5 th month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR1.17(q)	
126	180	126	180	Submission of IDS	
581	40	581	40	Recording assignment per property	
146	740	246	370	Filing a submission after final	
149	740	249	370	For each additional invention to be examined	
179	740	279	370	Request for Continued Examination	
169	900	169	900	Request for expedited examination of a design application	

Other fee: _____

SUBTOTAL (3) \$ _____

SUBMITTED BY:

John T. Raffle
Reg. 38,585
Ph: (408) 736-0224

Date 2/4/02